

## Chris Aquino

---

**From:** WMATC E-Filing <administrator@wmatc.gov>  
**Sent:** Wednesday, March 16, 2016 11:16 AM  
**To:** Constantine Kolouas; Chris Aquino  
**Subject:** 2016 Annual Report - WMATC No: 1749, Carrier Name: DC Nation, Incorporated

---

### Washington Metropolitan Area Transit Commission 2016 Carrier Annual Report Form

---

#### **FILING INFORMATION:**

- Each carrier holding a WMATC certificate of authority on January 1, 2016, must file a complete 2016 annual report and pay a \$175 annual fee on or before **February 1, 2016**. To be timely, the report and fee must be received at WMATC's office by 4:30 p.m. (or submitted online by 11:59 p.m.) on that date.
- Incomplete annual reports will not be accepted. All fields marked with an asterisk (\*) must be completed. If any information is missing or incorrect, make all necessary corrections.
- Each carrier that fails to file a complete annual report on time will be assessed a **\$150 late fee**. Each carrier that fails to pay the \$175 annual fee on time will be assessed a separate **\$150 late fee**.
- The WMATC operating authority of each carrier that has not filed a complete annual report and paid its annual fee and any assessed late fees will be automatically suspended effective May 1, 2016.
- Filing an annual report containing false information, or omitting information, may result in the assessment of a civil forfeiture.

Read the accompanying instructions carefully before completing this form.

#### **1. ANNUAL REPORT OF:**

**WMATC No.:** 1749

**Name of Carrier (as shown on certificate of authority):** DC Nation, Incorporated

**Trade Name:**

**Principal Place of Business**

**Street Address:** 6811 Cabin John Rd

**Apt./Suite:**

**City:** SPRINGFIELD

**State:** VA

**Zip:** 22150

**Mailing Address (if different from street address)**

**Street:** PO Box 30033

**Apt./Suite:**

**City:** Alexandria

**State:** VA

**Zip:** 22310

**E-mail:** [dcnationinc@gmail.com](mailto:dcnationinc@gmail.com)

**Maryland PSC No.: Virginia**

**E-mail:** [rsvp@dcnationtransportation.com](mailto:rsvp@dcnationtransportation.com)

**E-mail:**

--

**6. \*LIST OF REVENUE VEHICLES USED IN WMATC OPERATIONS:** (1) list your vehicles below or (2) upload a complete vehicle list to this form. If you have more than 10 vehicles in your fleet, you must use option 2. Include all required information.

<b>Fleet No.</b>	<b>Year*</b>	<b>Make*</b>	<b>Vehicle VIN*</b>	<b>License Plate*</b>	<b>State*</b>	<b>Seating Cap.*</b>	<b>Wheel Chair</b>
204	2012	International	3HAMMAAM2CL553488	P159885	VA	36	No
205	2011	FORD	1FDUF5GT7CEA22335	H526326	VA	28	No
206	2011	FORD	1FDUF5GT2CEA26583	H526329	VA	32	No
207	2014	FORD	1FDXE4FS2EDA48305	H524603	VA	24	No
208	2012	FORD	1FDWE3FL7CDA87225	HAA1657	VA	14	No
209	2006	FORD	1FDAF56P96EB43007	44606P	VA	28	No

**\*Filer has chosen vehicle list option (1), vehicles listed above. No vehicle list file was uploaded.**

**7. \*CERTIFICATION:**

I certify that this report, including any attachments, was prepared by me and under my supervision, that I have examined it, and that the information contained in it is true, correct, and complete as of this date.

**Name:** Mistral Anampa

**Title:** CEO

**Date:** 03/16/2016